NOTIFICATION OF MULTICANDIDATE STATUS

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(See reverse side for instructions)

This	form	should	be	filed	after	the	Committee	aualifies	as a	n multicandidate	committee

1. (a) N	AME OF C	OMMITTEE IN FULL			1			
F	reedo	m Pac						
(b) N	umber and	Street Address			_			
F	PO Box 24	185	FEC IDENTIFICATION NUMBER C00482703					
(c) Ci	ty, State ar	nd ZIP Code	3. TYPE OF COMMITTEE (check one)					
5	Springfield	I	VA	22152	STATE PARTY OTHER			
certif	y that c	one of the following situation	ons is correct (co	mplete line 4 or 5):				
		S BY AFFILIATION: The o						
	ffiliatio		iditarioodory quan	med as a manicandi	aato comin	iittoo tiiiv	ough ito	
C	Commit	tee Name:						
F	EC Ide	entification Number:						
		S BY QUALIFICATION:						
		ow (ONLY State party con	State/D	District	Date			
	(i)	Adam Kinzinger		Office Sought			00/07/00/0	
	<u> </u>			House	IL	11	09/07/2010	
	(ii)	Robert James Dold Jr.		House	IL	10	09/07/2010	
	(iii)	Daniel Benishek		House	MI	01	09/02/2010	
	(iv)	Timothy L. Walberg		House	MI	07	09/02/2010	
	(v)	John Thomas Graves		House	GA	09	06/30/2010	
(b) Co on:	ntributors: The committed	e received a cont	ribution from its 51s	t contribute	or	•	
(c) Re	gistration: The committee	e has been registe	ered for at least 6 m	onths. FE(C FORM	1 was	
`	•	omitted on:05/06/2010	·					
(d) Qu	alification: The committe	e met the above ı	requirements on:	12/19/2011		_•	
		re examined this Statement and to th Γ NAME OF TREASURER	he best of my knowledge SIGNATURE OF T	DE 4 01 IDED	t and complet lectronically F			
Robert	F. Carlin		Robert F. Carlin		- 1	04/24/2012		